To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

the state of the s	nstitution and S.9.10 of the Wisconsin Stat			
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUNICIPAL	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Don Reeder	Don D. Ruder	Street: 5 Veblen  City: Madison zip: 53705	Town Village Madigen	11 /2c/2011 (Month) (Day) (Year)
2. Elizabeth Chevez	Elizabet May	Street: 2 Coronado Ct. #1  City: Mad GON, WI zip: 53765	Town Uyillage City Wadiban	
3. Souli Kulkarno	Sail & Kin	street: SPGOP Rd  City: Madl3 Cn zip: WI	Town Village MACAB CO.	/  6/20
4. STEVEN ORECK	SULL	Street: 6215 S. HILMLANDS ALE City: MADYON Zip: 53745	□ Town □ Village □ City	/16/20
5. JAMES MILL	Same Mil	Street: 2430 6X NE  City: MANISON, W. zip: 5371	□ Town □ Village  City	11/16/20 <u>11</u> (Month) (Day) (Year)
Rachel Bennett	RahlBerritt	Street: 528 Wingra St City: Madison WI zip: 537/5	Town Village City  ALAUSCI	// // 20// (Month) (Day) (Year)
Teresh Burkeland	Teva Bukland	Street: 1110 m oorland Rd,#8  City: MNdison, WI zip: 53713	Town Village MAdison	11 /16/2011 (Month) (Day) (Year)
PANC Setbolythank	Poul School	Street: 2745 Fish Hatch eng Rett.	ETown Utiliage Fi+thらいり	// /7/2011 (Month) (Day) (Year)
GLENICE HALFMAN	Glerice Halfman	Street: 4709 ans ST City: Madison, W zip: 53711	Town Village Madeson	(Month) (Day) (Year)
John N. Wozniak	John W Wynah	Street: 113 CTHN City: Edge tow Zip: 53534	City Edgenton	// // // /20// (Month) (Day) (Year)
	Certification	of Circulator	Λ	
onally circulated this recall petition and personally obtaper with full knowledge of its content on the date indic	shor) sined each of the signatures on this paper. I know that	ify): I reside at	officeholder named in this petition. I know t	Municipality) hat each person signed
1/ / /7 /20 //	Buer	& Dinzia	r=======	Official Use Only)
(Month) (Day) (Year)		(Signature of Circulator)		

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PAM LEE	Danulle	Street: 503 Allen St City: Cambridge zip: 53573	Town Village Combolidge	(Month) (Day) (Year)
2. Sherry Culhane	Themy Cullian	Street: 352 W. Phurie 51.  City: Colinb US, WI zip: 53925	Town Uvillage City (C/Lambe)	// // // 2011 (Month) (Day) (Year)
WILLIAM G. ROBERTS	Willist Pilet	Street: 1429 STARR 6121955 DIZ City: MAD150N, WI Zip: 53719	Town Village PCity  MADISCU	(Month) (Day) (Year)
· Nancy Abraham	nancy abaham	Street: 1701 (CDE AM St. City: MAG 1501), W1 zip: 5371/	Drown Uvillage SCity Mad/SOM	////2011 (Month) (Day) (Year)
Jaclyn Stouffer	Jucolom Stonffer	Street: 309 Potter St City: Madism Zip: 53715	Town Village Madi'S m	
· Perry Hayes	My 1 Abr	Street: 3356 Glacier Ridge City: Middletune Zin: 18354	Town Village M Vddleta	(Month) (Day) (Year)
Teresa Kraemer	<u> </u>	street: 4809 Steinhauer Trail City: Madison W zip: 53716	Town Village  City  Madison	11/17/20_11 (Month) (Day) (Year)
Linnea James	Juneasures	Street: 8301 Flagstene Dr 53719 City: Madison, W zip: 53719	Town Village Madi'Son	11/17/2011 (Month) (Day) (Year)
Rose Stubbe	Produt	Street: 6819 Penna Dr City: Middleton zip: 53542	Town Willage Middleton	(Month) (Day) (Year)
James Stubbe	Comes Stull	Street: 6819 Donna Dr City: Middlet on zip: WI	Town Willage Middleton	11 /17 /20 II (Month) (Day) (Year)
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(Name of Circula nally circulated this recall petition and personally obtai	lato() ained each of the signatures on this paper. I know that the	ify): I reside at 4003 Hammers/Ly A (Circulator's Residence - Street name and the signers are electors of the jurisdiction or district represented by the	officeholder named in this petition. I know that	at each person signed
		residences given I support this recall petition. I am aware that falsifyin		

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

icle AIII, Section 12 of the Wisconsin Cor	nstitution and S.9.10 of the Wisconsin State			
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
JOANNE SCHILLING	Joanne M Schilling	Street 350 RUSSEN ST City: MADISON W1 Zip: 53704	Town Village A City  MADISON	11/15/20 <u>11</u> (Month) (Day) (Year)
Tyson Klipstein	Millin	Street: 517 Rethke Ave #1 City: Madison WI zip. 53714	Town Hour Journal on City Grove Grove	(Month) (Pay) (Year)
Inne Warker	Am en ales	Street: 1709 Winnebago St City: Madison zip: Wi	Town Village PCity Madi son	ty / 5/20_1( (Month) (Day) (Year)
DEIDRI DEANE	Deidi Deane	Street: 972 W. Badger Rd #D  City: Madison W zip: 53713	Town Village Washison	// //5/20_// (Month) (Day) (Year)
catherwe Shults	Cat S	Street: Z33 S. Fair Oaks Ave #3 City: Madison WI zip: 53704	Town Usilage Madrson	H /15/2011 (Month) (Day) (Year)
Susan Shaw	SwanDraw	street: 3213 At ward fre City: Madison WI zip: 53704	Town Willage Madison	1 / 15/20 11 (Month) (Day) (Year)
Kathryn M. Connell .	Miconnell	street: 4909 Cample Rd.  City: Madison zip. 537/6	Town Ordison	// /5/2011 (Month) (Day) (Year)
Druce Idanton	Bruce Pildington	Street: 1/34 Vernon Aue City: Modison Wi zip: 53716	Town Usillage City  Machine	11 //5 20 // (Month) (Day) (Year)
ANGELICA ENGER	Azlinetzel	Street: 433 W GIZMAN ST #2  City: MADISON, WI zip: 53703	Town Village MANISON	11/15/2011 (Month) (Day) (Year)
Micah Franker	Moth Sanfa	sirect 512 W. Wilson St #206  City: Madison. zip: 53703	Town Village Wallson	11 /15/20 <u>W</u> (Month) (Day) (Year)
	Certification		Ci'	+y , _
DAUID A H	lator)	rify): I reside at 420 Rawbo 44 (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the		SOV Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the ornicenoider named in discrete the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor S Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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20 <u>//</u> (Vent)	 Email Phone
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NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING		
1. Catherine Charlton Catherine Charlton	Street: 1502 Westward Wey #112	Town Utiliage City  Madison (Municipality Name)	//////////////////////////////////////	Phone (	
Print Manks of Charlor Show Maureen Charles	Street: 2407 MYVTLE  City: MAJ: 500 Zip: WI	☐ Town ☐ Village ☐ City  (Municipality Name)	// // 20 <u>/ (</u> (Minish) (Day) (Year)	Phone (	
Sign: Soudea Dalton	Street: 2002 GOISETH ST.  815  City: MADISON Zip: WI	Town Village QCity  MADTSON  (Municipality Name)	// //5/20// (Mouth) (Day) (Year)	Phone (	
4.  Print Michelle Warren  sign: Michelle Warren	street: 914 Fairmont Ave.  city: Madison, 219:53714	Town Ujlage City  Mad isom (Municipality Name)	// // / 20 / / (Manth) (Day) (Year)	Phone	
5. Print: Carolyn Morgan Sign: Caulyn D. m	street: 48 Golf Course RJ  city: Madison 21pt 53704	Town Village City  (Municipality Name)	// // /20_( (Manth) (Day) (Year)	Phone (	
2 <	Certification of Circulator	MAN	<i>01</i>		
I, SCHUL Suchson, (Printed Name of Circulator)	certify): I reside at OO Setta Street Name and Nu	umber) (Circulator Mun	<del></del>	Circulato Please include	

I personally circulated this recall petition and personally obtained each of the signatures on this paper, I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under \$123(3)(3) Wis. Stats.

(Month) (Year) (Signature of Circulator)

Circulators Please include Phone

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madisor
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	c
1. Print Chard Hestley super Ilandon	Street: 11/3 Williamson St APT1  City: Madison Zip: S3703	Town Ulliage City  Madison (Municipality Name)	// //6/20 <u>//</u> (Month) (Day) (Year)	Phone (608
2. Ingrid Rothe sy Lyid E. Rothe	Street: 300 N. Pinckney St.  City: Madison zip: 53703	Town Village Made Six (Municipality Name)	11/16/20 <u>[</u> (Month) (Day) (Year)	Phone (
sign. Jane Sopko	Street: 4414 DAKOTA Dr.	Town Village City  MACTSOM (Municipality Name)	/17/2011  (Munth) (Day) (Year)	Email Phone
4. Glen Barry Ster Den Ray	Street: 202 N Thornon Ave #1  City: Madison S3 708	Town Village City  Madissi  (Municipality Name)		Email Phone
5. GENESO WISSON SIGN SIEMS NULL	Street: 5164 ANDN DR 316  City: F. HOLBURG 21pt 53719	Town Village Seity  (Municipality Name)	/////20 <u>//</u> (Mansh) (Day) (Year)	Phone (22)
	Certification of Circulator			
- D S X S	200-1 Cockeda	SI MANISM		

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition, I am aware that falsifying this certification is punishable under S.12-13(3)(a), Wis. Stats.

(Circulator's Residence - Street Name and Number)

(Month) (Day) /20 // (Signature of Circulator)

(Printed Name of Circulator)

Page No. (Official Use Only)
# 2355

(Circulator Municipality)

Circulators,
Please include you
Phone

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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NAME & SIGNATURES OF ELECTORS  1.	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONT
Print: Heather Howard Sign: Leath Level	street: 446 Marston Avenue	□ Town □ Village ▼City  Madison (Municipality Name)	1 / 16/20 11 (Mouth) (Day) (Year)	Email Phone
2.	City VIII (OC) Sip: Oci 105			
Print RANDY HACKBETET	Street: 476 MARSTON AVE	☐ Town ☐ Village ☐ City	11 /16/2011	Email
3	City: MAD IS 60 Zip: 53703	(Municipality Name)	(Month) (Day) (Year)	(
Print RISTN BARRICK	Street: 4129 Marake &J.  City: Madrison zip: 53704	Town Village City  (Municipality Name)	[\ /16/20 <u>11</u> (Month) (Day) (Year)	Email Phone (406
Sign: David C. ARNIO	Street: 32 mp 12:13 NDR.  Street: 32 mp 12:13 NDR.  (11y: Mn 12-P. i Son 21p: 53713	Town Utiliage Deny  (Municipality Name)	1/1/20_1/ (Month) (Day) (Year)	Phone (
5. Print: Sarah Landbug Sign:	Street: 825 S- M: \\S 87	Town Village (Mumcipality Name)	(Month) (Day) (Year)	Phone ( )
No second	Certification of Circulator	A AA A		
I, <u>ane L Hadesen</u> , (Printed Name of Circulator)	(certify): I reside at 2118 E. Washington (Circulator's Residence – Street Name and Nu	Hva Madison (Circulator Munic	cinality)	Circulators,

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madison, V THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING MUNICIPALITY OF RESIDENCE DATE OF SIGNING CONT STREET & NUMBER OR RURAL ROUTE NAME & SIGNATURES OF ELECTORS (Also Indicate Town, City, or Village) Rural address must also include box or fire no. Email 1. Phone (Municipality Name) Email Town ☐ Village ☐ City Phone Email Town

Village ☐ City Phone (Municipality Name) Email ☐ Town ☐ Village City MADISON Phone (Municipality Name) Email Town

Village ☐ City Certification of Circulator

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 8:12.13(3)(a), Wy Stats.

(certify): I reside at

11 16 12011

(Printed Name of Circulator)

(Signature of Circulator)

alator Municipality)

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Phone
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Email

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PO Box 25

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madison, V THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING DATE OF SIGNING NAME & SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE CON Rural address must also include box or fire no. (Also Indicate Town, City, or Village) Email ☐ Town ☐ Village City Phone Email □ Town 602 S. Baldwin St ☐ Village **K**City Phone (Municipality Name) Email ☐ Town ZIIT MUIR FIELDRD+1 MADISON Phone MADISON (Municipality Name) Email □ Town □ Village Phone (Municipality Name) Email ☐ Town ☐ Village Phone

Jane	L. Ande	(certify)	Certifica E. I reside at 2/18 E.	ution of Circulator Washinston Are	Madiso	<b>^</b>
	(Printed Name of Ci			idence – Street Name and Number)	(Circulator Mun	icipality)
named in this per	tition. I know that each p	erson signed the paper wit		I know that the signers are electors of the the date indicated opposite his or her name		
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott

Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes. PO Box 25 Madison, V THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING NAME & SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CON Rural address must also include box or fire no. (Also Indicate Town, City, or Village) Email ☐ Town 3405 Viburnum DrNe Village Email Township Township Street: 1671 Sandy Rock Rd. ☐ City Phone (608 Email 3. ☐ Town ☐ Village City 6 Waite Circle Phone (Municipality Name) Email 4. ☐ Town ☐ Village City Phone (Municipality Name) Email Phone

Print: Shari Wittmary Sign: Shari Wittmary	1 1 1 2 7 T	Town Village City  (Municipality Name)	[[ \ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
	Certification of Circulator	_		
Jane L Andersen "	certify): I reside at 2118 E. Washington Ave	Madison		ir
(Printed Name of Circulator)	(Circulator's Residence - Street Name and Numb	ver) (Circulator Munici		lea
	tained each of the signatures on this paper. I know that the signers are electors o laper with full knowledge of its content on the date indicated opposite his or her s punishable under 8-12-13(3)(a), Wis, Stats.			
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	nstitution and S.9.10 of the Wisconsin Statu PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN.	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.
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GLORIA WILLIA	ns Gloralleia	Street: 2833 COUNTRY DR City: SUN PRAIRIE Zip: 53590	Village BRISTOL	11 /17/2011 (Month) (Day) (Year)
Richard Khayer		Street: W910 CHRLK City: AMING CD Zip: 53711	Town Willage City Arlungton	(Month) (Day) (Year)
Mariette Amunds	ion Mariette amund	Street: 1309 Vandenlrung Son Sun Prairie zip: Wt 052	Town Village Sun Matri	(// // 20 <u>//</u> (Month) (Day) (Year)
Sanara Kailberts	Sancina K Gelderten	street: 238 N Main City: Derfield 219:53531	Town Derfield	///17/2011 (Month) (Day) (Year)
Magchalynno'Leanj	aug and m	Street: 1918 Wallingford Circle City: Sin Prairie zip: 53690	Town Village Sun Prairie	// 7/20 <u>//</u> (Month) (Day) (Year)
David Killerlain	Diel 2	Street: 949 Derby dr City: Sun grain zip: 53590	Town Village Sun Prairies	// // /20
Darlene Bastion	Danlene Bastrow	City: Selen Marie Mars: 53590	Town Utildage City  Sun  Town	// // /20 <u>//</u> (Month) (Day) (Year)
JAMES Jagge	Jan Joy !	Street: 6 12 Olymp, c 5T City: SVN Prainin zip: 53 590	Town Sind Sind Sind	// // 7/20
	·	Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
) <b>.</b>	\$ 	Street: City: Zip:	□ Town □ Village □ City	(Month) (Day) (Year)
Sharoh Mohr	ator)	ify): I reside at 60 1 40 921 H Circulator's Residence - Street name and	d Number) (Circulator M	
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Brandon Montford	Bal Mit	Street: 1001 O'Keeffe Ave Apt 140  City: Sun Prairie, zip: 53590	Town Village City Sun Provide	(Month) (Day) (Year)
2. Joshua Attleson	John And	street: W11969 2nd St.  City: Randolph zip: W1	Town SUM City Current	11 /17/2011 (Month) (Day) (Year)
3. Denise Hosking	Demse D Hosking	Street: 678 North Main Street City: Fall River zip: 53932	Town SWIN City Fall (Mex.	11/17/2011 (Month) (Day) (Year)
4. Jan Hansen	Jan Hanson	Street: 956 Hunters to City: 5 Prane zip: 53590	Town Village SUM	// ///20_// (Month) (Day) (Year)
5. Denise Simular		Street: 1558 TrivyDR#7 City: Marilgon WT zip: 53704	Town SNIN SNIN SCity Willage	/ 1 7/20     (Month) (Day) (Year)
6. Jodi Dushack	Jodi Dushack	city Sun Practice zip: 53590	Town Village City Sum Praid	/////20 <u>//</u> (Month) (Day) (Year)
Fredericht Schultz,	Todorika J	Street: 413 Part CITCLe City: Sun Praise W1 53590	Town SNA)	// // 20 1 (Month) (Day) (Year)
8. Ryan Peterson	Pay Filting	Street: 851 O Keeffe Ave #52 City: Sua Prance WI Zip: 53590	Town SIM City Sun Prairies	) / 1 20 11 (Month) (Day) (Year)
9. Lynne fish	Lymes Los	Street: 865 Columbus S+#3	Town (NIN) City Sun Privile	11 /17/2011 (Month) (Day) (Year)
Adan L. Work	acken E. Wim	Street: 881 Berand Way D.  City: 601 Prairie zip: 53590	Town SUM	(Month) (Day) (Year)
Sharan Mahr (Name of Circul sonally circulated this recall petition and personally obta	lator) ained each of the signatures on this paper. I know that t	ify): I reside at (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the	officeholder named in this petition. I know t	Municipality) hat each person signed
paper with full knowledge of its content on the date indic	cated opposite his or her name. I know their respective	residences given. I support this recall petition. I am aware that falsifyi	ng this certification is punishable under S.12.	13(3)(a), Wis. Stats.

(Signature of Circulator)

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THE MUNICIPALITY USED FOR MAILING	nstitution and S.9.10 of the Wisconsin States		TICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Jennifer G. Vos	gennife Vox	Street: 859 Fox Run Court  City: Oregon 'zip:53575	Town Sum City	// //5/20
JEFFREY J ZACHER	JAM & DL	Street: 780 WATHERINE PA.  City: SUN PRAIRIE Zip: 53590	Town Village Scity Sun Prairie	11 /15/20_11 (Month) (Day) (Year)
Priscilla Rth MacDo	19all Marhongace	Street: 502 Engelhart Drive City: Wadison Wi zip: 53713	Town Village City	///5/20// (Month) (Day) (Year)
Sharon Mohr	Sharon Moh	Street: 60/1 Hagen Hill Circ. City: Madison W1 zip: 537/8	Town Burke	11/15/201/ (Month) (Day) (Year)
5. Alfry McInture	Ada Mofunda	Street: \$05 Elliot 57 City: PARCLOS VILLE WI Zip: 53113	Drown PARderville	
Travis corrado	Tues Com	street: 1845 Jactson ST city: STONGNTON zip: 53580	Town Syllings Series Strain	11/17/20 <u>1/</u> (Month) (Day) (Year)
Jonathan M'Gee	South Mega	ecity: Madison zip: 53711	Town Village City County	1//7/20 <u>41</u> (Month) (Day) (Year)
TROY BOILINGER	Jux Both	Street: 13/7 Mills RD  City: MARShall zip: 53559	City VORK	//7/20// (Month) (Day) (Year)
Diane Stone	Diane R Stone	street: 1959 Barrington Circle city: Sun Prairie zip: 53590	Town Village City  Stin Prairie	1 1 /17 /20 <u>1 1</u> (Month) (Day) (Year)
Steve Hayod	She Hof	street: 1034 Huntington DC city: Sun Plaise zip: 53590	Town Village Swy Mailie	(Manth) (Day) (Year)
Name of Circulared this recall petition and personally obtain	ator) , (cer	ertify): I reside at (Circulator's Residence - Street name and		
per with full knowledge of its content on the date indice	ated opposite his or her name. I know their respective	at the signers are electors of the jurisdiction or district represented by the variesidences given. I support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know the ng this certification is punishable under S.12.1  Page No. (0)	3(3)(a), Wis. Stats.

(Month)

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Street: 5911 Re il Valc 1/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   11/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   11/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   11/6/2011   Phone   City: Mc Farland Williage   Mc Farland   11/6/2011   Phone   City: Mc Farland	THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.						
Street: 5911 Re il Valc 1/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   1/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   1/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   1/6/2011   Phone   City: Mc Farland VI zip: 53558   City Mc Farland   1/6/2011   Phone   City: Mc Farland   City: Mc Farl	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS		MUNICIPALITY OF RESIDENCE	DATE OF SIGNING		
2. Oblightey Sull Nan Juthor Street: 5625 Osborn Dr Street: 5809 Cedar Ct Street: 5809 C	Michael Donn	Mult.	Sueet. S TT - ET G A IC 17 A 1	Town  Willage Mc Farland		Email Phone	
3. Connie Fedor Connie Jeden Street: 5809 Cedar Ct Svillage City: McFarland Willage City: McFarland Williage City: McFarl	- Ondra Sullata	Matter SM -	street: 5625 Osborn Dr	Town W. Farland	11 1/0/20/1	Email Phone	
City: McFalland Wiggs S3558 City (Month) (Day) (Year)	Course Fodow	Comming of Ladas	Street: 5809 Cedar Ct	Town W. Fauland	11 /16/2011	Email Phone	
	LUIVIIE FEARK	conne Gene	Street: 87-3 Glavey St	□Town	(Month) (Day) (Year)	Email	
Oand Sutton 81 CIW Phone City: McFarland WI Zip: 5358 City McFarland (Month) (Day) (Year)  Phone  Final	David Suttan	81 CEM	city: McForland WI zip: 5358	City Mctarland		Phone (Email	
AUSNA NICKOLAS Xuhan illa Street: 53/06 Congress Ave.   Indicated the Village   Villag	Alisha Nickolas	Leiha Micklas	والمنافظ أأنا والمنافظ المنافظ	☐ Village	(Month) (Day) (Year)	Phone (	
6. Street: 2101 Prairie Rd Town Village Madicia II /16/2011 Email	\/	lauret ALALN	street: 2101 Prairie Rd	□ Village M dd Ch		Email Phone	
7. Street: 2U71 Scott Un Strown U/1/2011 Email		may go Jasse	Street: 2071 Scott Ly	□ Village \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	// // /20// (Month) (Day) (Year)	Email Phone	
8. Street: Town Village / /20	•	0	Street:	☐ Village	, , , —	Email Phone	
Street:    Town	•		Street:	☐ Village	—	Email Phone	
Street: Town Village / /20 Phone	0.		-	☐ Village	, , , —	Email Phone	
Certification of Circulator  Certification of Circulator  (certify): I reside at 53.25 March 13d	Person Anderson		of Circulator	37 W 7 ***		Circula	

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content on the date indicated opposite his or the paper with full knowledge of its content or the date indicated opposite his or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content or the paper with full knowledge of its content

(Day)

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Page No. (Official Use Only)
# 2363

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

	nstitution and S.9.10 of the Wisconsin Stati	utes. TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.	
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Conge Andly Ave on A	James And	Street:	☐ Town ☐ Village ☐ City	/ /20	Email Phone
2. Ohnlik da (12)	11.11	Street: 530 McCormick Ave.	Town Madison	11 /16/2011	Email Phone
3.	(frame Sm/L	Street: 814 May Fair Ave #3	Town 10 1:5	(Month) (Day) (Year)	Email
Jeanne Weihert	Janu Steilug	city: Madison 219: 537/4	Village Madison	11 /17/20/11 (Month) (Day) (Year)	Phone Email
Trisha Bauer	Suha Sballer	Street 1201 North Pine Street 1 City: Sun Prairie Zip: 53590	Village Sun Prairie	// /2011 (Month) (Day) (Year)	Phone
5. BRIAN WBALLWAR	A MA	Street: 205N, THOMPSON DEHY City:MADISON WIE Zip 53714	Town Village City  MADISO  N	///7/20 <u>ll</u> (Month) (Day) (Year)	Email Phone
Signerian	Day V. Bras	street: 4406, Village lange City: Wad Son zip: 52704	□ Town □ Yillage IA A	Month) (Day) (Year)	Email
TREVOR BANNISTER	Twoff	Street: 2453 UPHAM ST  City: MAD 150N Zip: 53704	Town Village MAD 150N	11 / 17/20 <u> </u>	Email
8. Lindsey Gulvik	Hundbey Gulick	street: 1345 Ellenwood Dr. cty: Madison zip: 53714	Town Village Madison	// // /20 11 (Month) (Day) (Year)	Email
MANJULA DISSANAY	KE Den anayaka	3806 MISTY LN DEFOVEST	Town Deforest	(Month) (Day) (Year)	Email Phone
Sarah R. Cannon	Such R. Cannon	street: 3714 Brigham Are City: Madison WI zip: 53714	Town Village Madison	11 / 17/20 11 (Month) (Day) (Year)	Email Phone
Arthur Hack	Certification (corfi		AN Modis	Ton	
(Name of Circui personally circulated this recall petition and personally obta e paper with full knowledge of its content on the date indic	lator)	(Circulator's Residence - Street name and be spiner; are electory of the jurisdiction or district represented by the estidences given I support this recall petition. I am aware that falsifying	(Circulator Mofficeholder named in this petition. I know the last this certification is punishable under S.12.	Aunicipality) nat each person signed 13(3)(a), Wis. Stats.	Circ
1/ / / / / / / / / / / / / / / / / / /	11 111-11	$V / \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! $	Paga No. (a	Ministry Control	

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes

Article XIII, Section 12 of the Wisconsin Con	nstitution and S.9.10 of the Wisconsin Stat	utes.			
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1. Priscilla Agnello	Prisalle ayrullo	Street: 701 Pinecress dr.  City: Madis on WI zip: 53714	Town Village Stry Mad Zen	(Month) (Day) (Year)	Email Phone
SHARI Corey	Sha	Street 9840 Commercial 1	Town Village Mapison	// //6/20_// (Month) (Day) (Year)	Email Phone
3. Kimberly Mayre	hunder )	Street: 2940 Commercial Au Cay: Madison zip: 53704	Town Village Weity Mark 582	(Month) (Day) (Year)	Email Phone
AARON HOWARD	1 de la constante de la consta	Street: 536 ALISOM A 5T Chy: MAIDI SOW WI 245:53704	Town Utillage Ocity  MAD Garage	// // /2011 (Month) (Day) (Year)	Email Phone
Shirley White head	Ich Wy	Street: 5/1 Alguma City: MacTSON zip:53704	□ Town □ Village □ City  Mo. CISON	// /6/20/ (Month) (Day) (Year)	Phone (
Faven Brey	Faen Brug	Street: 2813 Hoard City: Madison zip: 53704	Town Uvillage City MadiSon		Email Phone
MARK FITZGERALD	Much Atologo	Street: Z813 HOARD ST.  City: MADISON Zip: 53704	Town Village City  Mad i Son	(Month) (Day) (Year)	Email Phone
ELISABETH FOSTER	Shelt Uforth	Street: 2805 HOARD ST. CHYLLAN ISON WI Zip: 53704	Town Village Madism	(Month) (Day) (Year)	Email Phone
JAMES P. FOSTER	James P. Fost	Street: 2805 HOARD ST City: MADISON WI Zip: 53704	Town Village  City  MAD (SON)	(Month) (Day) (Year)	Email Phone
Topok Aspenson	Ted Klybu	Street: 530 McCORMICIE AVE City: MADISON, WI. Zip: 53704	Town Usullage  City MDV (SW)	(Month) (Day) (Year)	Email Phone
Certification of Circulator  Arthur Hackett (certify): I reside at 522 McCovnich My Madistr S374 (Circulator's Pacidance Street name and Number) (Circulator Municipality)					
paper with full knowledge of its content on the date indic	cated opposite his or her name. I know the respective	the Kighel's are electors of the jurisdiction or district represented by the estate of the first support this recall petition. I am aware that falsify:	e officeholder named in this petition. I know thing this certification is punishable under S.12.	nat each person signed 13(3)(a), Wis. Stats.	

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUNICIPAL	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAY	S BE LISTED.
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Cory Hetchler	com attun	Street: 522 W Wilson St At 305 City: Madison, Zip: 53703	☐ Town ☐ Village  City	///5/2011 (Month) (Day) (Year)
"Jennifer Angelander	Terriefer Orgelance	Street: 1715 Erie Ct. City: Madison zip: 53704	□ Town □ Village  ★City	11/15/2011 (Month) (Day) (Year)
Sheila Ellis	Shila Ellis	Street: 26 SUMMETVIEW Ct #D  City: Madison zip: 53704	□ Town □ Village A City	11/15/2011 (Month) (Day) (Year)
"ANGELA REINDL	Chyla M. Kuil	Street: 4906 MAJOR AVE City: MADISON Zip: 53716	☐ Town ☐ Village  □ KCity	///5/20 <u>//</u> (Month) (Day) (Year)
Jeanne ROWALD	Jeans Rowall	street: 1420 Frederick St City: Janesville zip: 53548	□ Town □ Village  ★City	11 /15/20/((Month) (Day) (Year)
Michele Rosas	Michele Ross	Street: 1921 Schlingen AN	□ Town □ Village ★ City	///5/20// (Month) (Day) (Year)
·Lor, Schneeberger	Lori Schnedergen	street: 5417 Heather RD City: MIDDLETON Zip: 53562	□ Town □ Village  □ K City	
Rhonda Massey	Khonda K Massey	street: 5313 Bauer Dr.  City: Madison Wi zip: 53718	□ Town □ Village ♥ City	(Month) (Day) (Year)
Rona Bolling	Rona Bollis	street: 232 Columbus St City: Sun Prairie zip: 53590	□ Town □ Village  \$City	11/15/20
Jennifer Sherry	Junto Shang	street: 4718 School Rd City: Maduzon zip: 53704	☐ Town ☐ Village ☐ City	
Aila Ellis	Certification (	of Circulator  (fy): I reside at 24 Summer VICO Ct	#D Madisa	20

I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator) (Month) (Day) (Year)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MATELING	PURPOSES, WHEN DIFFERENT THAN MUNICIPALI	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUI		5 BE LISTED.
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WHRK HURNED	MI A.	Street: 725 MOORLAND RD  City: MRD 1502 W1 Zip: 53713	☐ Town ☐ Village ☐ City	(Month) (Day) (Year)
REBECCA BIEWY	Rainy Resucca Bainy	Street: 2071 MCKENNA BLVD  City: MADISON WI Zip: 53711	☐ Town ☐ Village ☐ City	11 /15/20_11 (Month) (Day) (Year)
Stacy E. Beckmann	Systa	Street: 2130 La Follette Ave City: Madison WI zip: 53704	☐ Town ☐ Village	11 /15/20_11 (Month) (Day). (Year)
Kathryn L. Jones	Kathyroldons	Street: 1705 Hoover St Skuthand City: Cyeson W. Zip. 33375	□ Town □ Village □ City	11 /15/2011 (Month) (Day) (Year)
Dana Carpenter	Daner Consenter	Street: 941 Park St  City: Oregon zip. 53575	□ Town  Village □ City	11 /15/2011 (Month) (Day) (Year)
hatelyn Vennie	Katelyn Vennie	street: 20 5, Broom St Apt#2  City: Madison zip: 53703	□ Town □ Village ▼City	11 /15/2011 (Month) (Day) (Year)
inda L. Langlois		street: 2016 Adderbury Lane  City: Madison WI zip: 53711	□ Town □ Village ▼City	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
hr.stopher A Ellis	4-4	Street: 26 Summerulew ctart 15 City: Madison Zip: 53284	□ Town □ Village	11 /65/2011 (Month) (Day) (Year)
Lisa M. Hebl	LisaM. Hebl	Street: W5073 Cowgill Rd City: Rio Zip: 53960	XTown □ Village □ City	11 /16/2011 (Month) (Day) (Year)
Joyce H. Knapton	Joyce H Knapton	Street: 316 Sleepy Hollow Ln. City: Marshall zip: 53559	☐ Town  Solvillage ☐ City	1///6/2011 (Month) (Day) (Year)
Name of Circul			# Mad S (Circulator	Municipality)

(Signature of Circulator)

(Month)

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Angela M. Ghelf  City: Janesville WI zip: 53545  City: Janesville WI zip: 53545  City: Janesville WI zip: 53545  City: Janesville WI zip: 53535  City: Fulton Williage  City: Wilson WI zip: 53535  City: Millon WI zip: 53535  City: Millon Williage  City: Edgerton Wizip: 53535  City: Millon Williage  City: Edgerton Wizip: 53535  Catherisec Sill Cuthure See Sill Cuthure See Since 1503 E Rd 3  City: Millon Williage  City: Millon Williage  City: Edgerton Wizip: 53535  Catherisec Sill Cuthure See Sill Cuthure See Since 1503 E Rd 3  City: Edgerton zip: 53534  City: Millon Williage City: Millon Williage  City: Millon Williage City: Millon Williage  City: Edgerton Wizip: 53534  City: Millon Williage City:	THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	TICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.
Angela M. Ghelf  Some Hauthous Alexa South of So	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS		MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
ander Bradley Nander Drude Street Ho State Rd 57   Chings Fulton (15/201)   1/5/201    1	1. Angela M. Ghelf	Argie Ghelf-	_	☐ Village	
DUIT VERHALEN Juliverbalen (1/15/2011)  Some Millon WI 20 53563 (2000)  School Nevel (2/1 W. Shrash M#) (1/15/2011)  Catherine Sill (1/15/2011)  Commend (1/15/2011	Vandeta Bradley	Mandel Bridley			
Secret 1120 N Richge Rol Town Williage Not 15/20 Ll Such Nevel Cay Polagerton Williage Not 16/20 Ll Survey Notary Orders Catherina Significant Notary Notary Orders Catherina Significant Notary Notary Notary Orders Catherina Significant Notary Nota	JULIE VERHALEN	JulieVerhalen	200.4	UVillage	
Rebecca Ruphan Debythy Street: 621 W. Surset W.49 Town Williage Milton, WI 215: 53563 City Milton (Manih) (Day) Orang Town Office of Catherine S:1) Cottone Deo Street: 1503 F. R. d. 3 Strown Williage Milton (Manih) (Day) Orang Town Office of Catherine S:1) Cottone Deo Street: 1415 Frederick St. Town Williage Milton (Manih) (Day) Orang Town Office of Catherine Street: 1415 Frederick St. Town Williage Milton (Manih) (Day) Orang Town Office of Catherine Street: 1415 Town Office of Catherine Street: 14120 N. Ruge Food Williage Milton (Manih) (Day) Orang Town Office of Catherine Street: 14120 N. Ruge Food Williage Milton (Manih) (Day) Orang Town Office Offi	Jody Nevel	Jody Devel	1 (1)	□ Village	/5/20_11 (Month) (Day) (Year)
Catherine S:1) Cutine Die Street 1503 F. Rd 3 Strown Willinge Milton (Month) (Ony) (Year)  City: Edgenton 21/253534 City Millinge Street 14/5 Frederick St. Other Willinge Street 14/5 Frederick St. Other Willinge Street Street 14/5 Frederick St. Other Willinge Street Other Street 14/5 Frederick St. Other Willinge Street Str	5. Rebecca Rupna	Pek thip	Street: 627 W. Sussef Dr.#4 City: Mitton, WI zip: 53563	□ Village .	///5/2011 (Month) (Day) (Year)
Street: 1415 Frederick St.   Town   Village	Catherine S;1)	Cutture Dies	Street: 1503 E Rd 3	Town Village Village	
JEAN BUSKE Jean Buske Street: 3153 Clove DR   Town   Village MAdison   11 /16/20/1   In the street: 3153 Clove DR   Town   Village MAdison   11 /16/20/1   In the street: 11/20 N. Ridge Good   Village   Milton   11/16/20   In the street: 11/20 N. Ridge Good   Village   City   Village   City   Town   Village   City   Village   City   Town   Village   Village   City   Town   Village   Village   Village   City   Town   Village   V	5. Susan McQuade	Swall Mylles	Street: 1415 Frederick St.	□ Village	/15/2011 (Month) (Day) (Year)
James Nevel James No. 21p. 53534 City Flory James No. 11/16/20_   I Town Village   Town	8. JEAN BUSKE	Jean Buske	Street: 3153 Clove DR		
TACOB NEVAL AND Street: 407 S. RINCHOO ST TOWN VIllage VILLE 2011 TOWN VILLE 2015 STOWN TANESVILLE (Month) (Day) (Year)	"James Nevel	James New X		Uvillage	17 ' ' '
Certification of Circulator	JACOB NEVEL	an Aml		□ Villana	(Month) (Day) / 20 M_ (Year)
TO TOWN THE	Shila 20lis	,	of Circulator	+# Madis	<b>30</b>

Certification of Circulator

(Name of Circulator)

(Name of Circulator)

(Circulator's Residence – Street name and Number)

(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his order name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Month)

(Day)

(Year)

(Signature of Circulator)

(Signature of Circulator)

(Signature of Circulator)

Circulate Pho Em

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Diane Whitehad	On white	street: 501 W. Mohawk Tr City: DeForest, zip: 53532	Town Willage Deforest	11/16/20_11 (Month) (Day) (Year)
RANK DEDERICH	Fathelinh	Street: 4483 4X1 57 City: 10/3/1500 21pL 3 548	Town WINISIR	///6/20// (Month) (Day) (Year)
Rory Johnson	Shan Mr.	Street: 420 W Linkoln ST City: De Fores TWI zip: 53532	Town Grillage City Defores	// // // 20 <u>//</u> (Month) (Day) (Year)
Kim Renz	Kim Renz	Street: 4545 Smith Rd.	Town Village Windsov	(Month) (Day) (Year)
Tizabeth A. Sorge	Elizabeth a Sorge	Street: 59/7 Riva Road  City: Madison zip: 537/1	Town Village Madison	// //6 /20// (Month) (Day) (Year)
i		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)

(Month)

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1. PAT Schenck	Lat Schenck	Street: 414 Iroquois Ct	Town  Nyillage De Forest	// //6/20_//	Email Phone
		city: Do Forest W/ Zip:53532		(Month) (Day) (Year)	Email (
Draw Biodrowski		Street: 217 Trailside Dr.	□ Town  Styllage □ City De Forest	///6/20//	Phone
	0 12 -	City: DeForest, WI zip: 53532	DELOVE 2)	(Wollin) (Day) (Year)	Email (
3. Loury Arnold	Laurole	Street: 638 & Churry St  City: Occhomowa zip: 53000	Definition OCONOMACOC		Phone
4.			☐ Town	1.1	Email
STEPHAN MILLER	State	Street: 309 VALERIA DR  City: De Foless Zip: 53532	Willage	11 /16/20 <u>J)</u> (Month) (Day) (Year)	Phone (
5.		21 2.5. 4		31 / 31 / 31	Email
Lila Salzw EDEI	Lita Dazmetel	Street: 104 Deforest  City: Deforest b zip53232	Drown  Brillage We Forest  City	// // 6/20 <u>1</u> (Month) (Day) (Year)	Phone (
6. Hepryxx G Nehle	Heyran I Millen	Street: 300 COLUMBIA	Town De Joseph	11/16/20/1	Email Phone
The Print	Apena. It flows	city: De Forest zir 53532	City	(Month) (Day) (Year)	Phone (
7.	altin	Street: 7621 Conifer Ct.	Town Uillage Windso/	11 /16/2011	Email
Joel Ferkovich	Car y sur s	city: Deforest, WI. zip: 53532	City City	(Month) (Day) (Year)	Phone (
8.	0,01	Street: 130 Jany Meade In	□ Town	11/1/20/11	Email
Juan Mackrid	a d	city: Madrison, Wzip. 53713	Decity adison	(Month) (Day) (Year)	Phone (
9.		Street: 316 S. Cleveland	□Town	11 /16/2011	Email
KEITHMANKE	Kuth Marke	City: Defruit WI Zip: 53532	City De Falet	(Month) (Day) (Year)	Phone (
10.	Samey Hanon	Street: 633W. Mohawk Tr.	Town Sivillage De Forest	11 /16/2011	Email
Jamey Stanosz	- Juriay Autori	city: Deforest zip: WI	City De Co.	(Month) (Day) (Year)	Phone (
	Certification			1	
Carol (rotting	γeν (cert	ify): I reside at 6645 Scatterg ood	Litta Win	dsor	<b>a.</b>
(Name of Circu	dator)	(Circulator's Residence – Street name and			Circi [
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know/their respective esidences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.					
	(aral	Mittener		fficial Use Only)	
(Month) (Day) (Vear)	<del> </del>	(Signature of Circulator)		70	

(Month)

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.,	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
narcos Banuelos	Marco Burlo	Street: 4620 Cfy Hwy V City: DeForest 21,535.	□ Town Village	///6/2011 (Month) (Day) (Year)
nne Alexander	anne alexander	sire820 Clover Lane city:DeForest zip: 5353	Town VI Village City DeForest	// // /20// (Month) (Day) (Year)
Ryan Johnson	Ra forma	Street: 209 ENDISH St.  City: Deforest Zip: 535	Town Village Octorest	// / 20 <u>1)</u> (Month) (Day) (Year)
Mary D. Jacobsor	Mary Daroba	street: 304 Scott Dr.  City: De Forest zip: 5353	Village De Forest	// // /2011 (Month) (Day) (Year)
Erica E. Pray	Erica Pray	Street: 119 Carriage Way City: De Forest zip: 5353	Town Village Deforest	11 /16 /201 (Month) (Day) (Year)
Jennifer L Casper	Inniged Oasper	street: 809 Clover Lane City: De Forest Zip: 535	Town Deforest	11/16/20 <u>11</u> (Month) (Day) (Year)
Anne E. Utz	Anne E. Why	Street: 440 Uhion Street City: Sun Prairie W zip: 5350	Town Village Sun Prairie	11 /16/2011 (Month) (Day) (Year)
Jean A.Brennan	Jean A Brennan	street: 6575 Chestnut Ci	Village Windsor	// //6 /20 // (Month) (Day) (Year)
	er Gail C. Wagner	City: DeForest zip: 5353	/ 日本の アロレング・ナ	11 /16/2011 (Month) (Day) (Year)
	V	Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)
Carol Gotti	Certification (certification)	of Circulator ify): I reside at 6645 Scatter good	Lutte Winds	10
(Name of Circui	lator) ained each of the signatures on this pager. I know that to cated opposite his or her name. I know their respective	ify): I reside at OCT Sesidence - Street na (Circulator's Residence - Street na the signers are electors of the jurisdiction or district represented residences given I support this recall petition. I am aware that	me and Number) (Circulator  I by the officeholder named in this petition. I know	Municipality) that each person signed

(Signature of Circulator)

(Month)

(Day)

(Month)

(Day)

(Year)

## SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MAILING	nstitution and S.9.10 of the Wisconsin States Purposes, when different than municipals	utes. TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	IICIPALITY OF RESIDENCE MUST ALWAY	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
Walter F. Block	Welle & Block	Street: 426 Hillington Way City: Mad. son zip: 53726	National Control of the Control of	11 16/2011 (Month) (Day) (Year)
CHARLES LEVEQUE	Cule June	Street: 4650 HILLCREST DR CityMIDDLETOU ZID: 53562	City Cown	1\/16/20_11 (Month) (Day) (Year)
Lois Leveque	Do is Leugue	street: 4650 Hillcrest DR.	Trown Village Middleton	11 /16/20/11 (Month) (Day) (Year)
Neal Lord	newlood	Street: 1518 Jefferson St City: Madison zip: 53711	Town Utillage Medison	11 / 16/20_(1 (Month) (Day) (Year)
Joanna Mandt	Joanna Mandt	street: 3610 Nakoma Rd.  City: Madison zip: 53711	Town Village City Wadison	11 /16/20 (Month) (Day) (Year)
BARBARA SANFORD	Panbara Sanford	Street: 1211 GARFIELD ST  City: MADISON Zip: 53711	□ Town □ Village  MADISON	11 / 16/20 <u>11</u> (Month) (Day) (Year)
Matthew Mendt	Milhams	Street: 3610 NAKOMA RO  City: MADISON Zip: WI	Town Village Betty Madison	11/6/20_11 (Month) (Day) (Year)
KARL NIBBELINK		Street: fol Wouseness Ae City: Mas 1111 W1 Zip: 53 Juy	Town Village City City	(Month) (Day) (Year)
CARRIE ROMANT	Carrie Romant	Street: 801 Woodward Or City: Madison WI Zip: 53704	Town Village  City  MADISON	11 /16/20 11 (Month) (Day) (Year)
PAULA HIRSCHBDECK	Paula Hirschboude	Street: 501 5. Midval BIUJ City: WAD(52N zip: 53711	□ Town □ Village  City  MADISON	1 ( / 16/20(Month) (Day) (Year)
ally circulated this recall petition and personally obtains with full knowledge of its content on the date indicates	otor) ined each of the signatures on this paper. I know that t	fy): I reside at 555 5. W.O. De Block of Circulator's Residence – Street name and the signers are elected of the jurisdiction or district represented by the residences of the Jurisdiction. I am aware that falsify	d Number) (Circulator I) officeholder named in this petition. I know t	Municipality) hat each person signed 13(3)(a) Wis Stats

(Signature of Circulator)

Page No. (Official Use Only)
# 2372

Pho

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA	
1. Shelly Gnewi Kaw	Street: 472 Dahl Orive	☐ Town  ☐ Willage ☐ City	11 /15/2011	Email Shelly 9	
Sign:	neforest zip. 53532	(Municipality Name)	(Month) (Day) (Year)	Phone (608)	
2. Hildegard Browning	1	□ Town □ Village □ City	11/15/2011	Email	
Sign: Addgrad Brang	civ. Blanchard ville zip. 53516	(Municipality Name)	(Month) (Day) (Year)	Phone ( )	
3. Sandra Stegenwald	Street: 109 W. Kohker St.	Town San Prairie	11/1/5/20//	Email	
Landry Stegenald	Sun Prairie W/ 53590	(Municipality Name)	(Month) (Day) (Year)	Phone ( )	
4. Print: Fack Robertson	Street: 3530 Johns St.	□ Town □ Village  **City**  **Malican**	II /15/20IL	Email	
Sign:	city: Madison zip: 53714	(Municipality Name)	(Month) (Day) (Year)	Phone ( )	
5. Print: Michelle Palay	Street: 957 Couvrence St	Town Village Recity  Machison	11/15/2011	Kevm;	
Sign: Mille 1 Valy	cive Madison zipe 53715	(Municipality Name)	(Month) (Day) (Year)	Phone ( )	
	Certification of Circulator		A C -1		
I, Shelly Grewi Vow, (Arinted Name of Circulator)	(certify): I reside at 472 Oahl Mive (Circulator's Residence – Street Name and Nu	University Village of (Circulator Munic	<u>Detorest</u>	Circulators, Please include your con	

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Day)

(Signature of Circulator)

Circulators, Please include your con

Return by Ja

Committee to

PO Box 2569

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Ja Committee to PO Box 2569

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA	
1. Marybeth Wilk sign: Maybeth Wilk	Street: 29 N7th St, City: Madison WIzp: 53704	Town Village City  (Municipality Name)		Phone ( )	
2. Erik Nielsen Sign: Sklll	street: 705 Diving Hawk Tr  City: Madison Zip: 53713	Town   Village   RCity   Madison   (Municipality Name)	(Month) (Day) (Year)	Phone ( )	
3. Print: Debra Vieana Sign:	Street: 185 Prairie GRASS  City: OREGON Zip: \$3575	Town   Village   City   ORFGON (Municipality Name)	1 /15 /20 11 (Month) (Day) (Year)	Phone ( )	
sign: Qualith Coats	Street: 1229 Iowa Dr City: Maduson zip: 53704	Town Village City (Municipality Name)	11/16/20 <u>11</u> (Month) (Day) (Year)	Phone ( )	
5. Print: LEA KUBO Sign: Dea Yugo	Street: 70 Millard Ct.	Town Usillage City  (Municipality Name)		Phone ( )	
I, Shelly Grew'low, (Printed Name of Circulator)	Certification of Circulator  (certify): I reside at 472 Dahl prive  (Circulator's Residence – Street Name and Nu	Village of (Circulator Munic	<u>Defore</u> St	Circulators, Please include your cont.	

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(Year)

(Signature of Circulator)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
i. RICHARDL: UNTLEKOFER	Michael L. Sullahafes	Street: 1934 LA STERRA WAY City: MADISON Zip: 53716	Town Utillage ACity (MAO (SOX)	11 /15/2011 (Month) (Day) (Year)
Alex Nitke	Mex Mills	Street: 1715 Blotton Lane City: Madiban zip: 53716	Town Wad San	(Month) (Day) (Year)
"MIKE Photes	Mile hods	Street: 115, 185, 177, 187, 187, 187, 187, 187, 187, 187	Town Village MADISON	
Toye Holmes	tope Hofen	Street: 17/5 Blosson LN # 2 City: MAJISON ZIP: 53714	Town Village MADISON	(Month) (Day) (Year)
Crystal Gile	Cuprel Dito	street: 1715 Blossom In #3 City: Madison zip: 53716	Town Village  Scity  Madison	(Month) (Day) (Year)
Ghen Muric	Gringh	Street: 1713 Blosson Ln #4  City: Mail Ban zip: 53716	Town Village Wallyen	11 /15/2011 (Month) (Day) (Year)
Ashley Cato	asis Jon	Street: 1709 Blossom in #2 City: Mcdison zip: 53716	Town Uvillage DoCity  Town	(Month) (Day) (Year)
MICHAEL DENSON	mejfe	Street: 1709 Blusson (w#3  City: MADISON Zip: 53716	Town Village MAJISON	(/ //5/20// (Month) (Day) (Year)
Brenda LaBorte	End That	Street: 1709 Blossom In #8	Town Village Moc SO	(Month) (Day) (Year)
o. Ross Brantz	Pon Rot	Street: 1769 Blossom Ln # 8 City: Madison WT zip: 53714	Town Village Madison	// /5/20 <u>/ (Month) (Day)</u> (Year)
as market and	Certification of	of Circulator		
<u>ICHARD L. INTZEKO</u>	FER, (certi	ify): I reside at <u>1934 LA SIERRA</u> Va	VAY MAUSON	<i>!</i>

(Signature of Circulator)

(Day)

(Year)

(Month)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.					
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. JACQUELINE Schaaf	Lacquesignes	Street: 1717 Blossom Ln. April * City: Mach: 501 WI zip: 53716	Town Village City  MOD SON	11 /15/20 11 (Month) (Day) (Year)	Email Phone
2. Cornette Betts	1006 20 Pent	Street: 1806 LAKE Point DR	□ Town □ Village □ City A A SON	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
3. Crystal Brantley	3522 Evan Acres Rd.	Street Brantley City: Mad Son zip: 53718	Town Village Vacisty	///5/20((Month) (Day) (Year)	Email Phone
1ª Pronder Hart	madison wt	Streets	☐ Town ☐ Village ☐ City	/ 20 (Month) (Day) (Year)	Email Phone
5. Pinonda Hart.	Rhonda Hout	city: madyon zip: Ln 3	Town Village Madison		Email
6. Coruette Betts		Street: 1806 LAKE Point Pn Ku	Town Village City M Adison	)\ /\5/20 <u>/</u> ) (Month) (Day) (Year)	Email Phone
7. Crystal Brantley (	ryotal Braitley	street: 3522 Evan Acres Rd 24 city: Madison zip: 53718	□ Town □ Village  ACity McCliSon	[ ( /15/20] (Month) (Day) (Year)	Email Phone
8. Toy LMCMiller	Jy Mullo	street: 1705 Blossom LAVE #80 city Maellson, WI zip: 53716	Town Village City WallSUN		Email Phone
Jim Holne	1 / 1/4 ham 1	street: 1705 Blossem Lane #8 city: Madison zip: 53716		(Month) (Day) (Year)	Email Phone
10. Jason Sebelin	Thus	Street: 1705 BIOSON LN #2 City: MadiSon zip: 53716	Town Village Madi30N	///5/20/11 (Month) (Day) (Year)	Email Phone
Certification of Circulator					
RUHARD (Name of Circulares of the content on the date indices to paper with full knowledge of its content on the date indices of the content of the con	ator) ained each of the signatures on this paper. I know that th	fy): I reside at	officeholder named in this petition. I know th	funicipality) at each person signed	Cir

Page No. (Official Use Only)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING		
1. Print: BACTOSZ SZRATULA Sign:	Street: 2120 RUSK ST. #3  City: MADISON, Zip: 53704	Town Village SCity  MADISON (Municipality Name)	/   5/20 <u>11</u> (Month) (Day) (Year)	BS Phone	
2. Marshall Smith sign: Mall	Street: 3521 Harper Rd  City: Madison 21p: 60: 33704	Town Uvillage City  (Municipality Name)	(Month) (Day) (Year)	Phone (6	
sign: Michelle Barbon	street: 2333 Hogerd #2  City: Markeyson 24: 53704	□ Town □ Village □ City  (Municipality Name)		Phone (¿cc	
rini Rachel Groessel sign Packel Grul	street: 903 Chapel Hill Rd  city: Madison zip: 53711	Town Village Cocity  Madi Sou  (Municipality Name)	(// / /5/20 <u>1 (</u> (Month) (Day) (Year)	Phone	
5. Print: James Mc Allister Sign: James M. Allister	Street: 4102 Drexel Avenue  City: Madrison 219: 53716	Town Village Village Vity  Madison (Municipality Name)	// //5/20 <u>//</u> (Afonth) (Day) (Year)	Emai 49 Phone	
Certification of Circulator  Certification of Circulator  Certification of Circulator  Circulator A Lance Wilde (Certify): I reside at 4 02 Drexe A Lance Madison (Circulator's Residence - Street Name and Number) (Circulator Municipality)  Please inclu					

Page No. (Official Use Only)

# 2 3 7 7

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Month) (Day) /20 (Year)

(Signature of Circulator)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott

Return

Comm Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes. PO Bd Madis THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING NAME & SIGNATURES OF ELECTORS MUNICIPALITY OF RESIDENCE DATE OF SIGNING STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. (Also Indicate Town, City, or Village) 1. ☐ Village 5 r E City Phone (6 MADISON Email 2. ☐ Town ☐ Village EM City Phone Email 3. ☐ Town ☐ Village **E**City madison (Municipality Name) ☐ Town Village City B 11/15/20\_11 Phone (60)□ Town Village Tra Certification of Circulator (certify): I reside at 4102 Drexel Ave (Circulator's Residence - Street Name and Number Circulators Please include y I personally circulated this recall petition and personally obtained each of the signatures on this paper, I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition, I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Month) (Day) (Year)

Page No. (Official Use Only)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return Commi PO Box

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.				
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	C
1. Print RICHARD WIRINGA Sign: Mulling	Street 4800 ENCHANTED VALLEY RD  City: MIDDLETON Zip: 53562	□ Yown □ Village □ City  SPRINGFIELD (Municipality Name)	// /5/20/1 (Month) (Day) (Year)	Email  FWIFI  Phone
Print Catherine Hutchison Sign: Lathere Deutchison	street: 7314 Vista Ct.  City: Middleton W1 53562  Zip:	™ Town  □ Village □ City  Middlefon  (Municipality Name)	11 //6/20 11 (Month) (Day) (Year)	Email  LAU  Phone
3.  Print: Susan Ahrens-Arendt  sign: Surallhen Werlw	Street: 4714 Capital View Rd  City: Middlefor, WI zip: 53562	Town Village City  (Municipality Name)	// //6/20_// (Month) (Day) (Year)	SUSA Phone (608
4.  Print: David W. Arendt  Sign: Wandered	Street: 4714 Capital VICIN RO  City: Middlefm Wi Zip: 5356	Town Village Decity Middleten (Municipality Name)	// /// 20_// (Month) (Day) (Year)	Email Phone
5. Print: Sara W. Simpson Sign: Jarah. Ain		Town Village City  MiddletoN (Municipality Name)	/ / //6/20_11 (Month) (Day) (Year)	Email Source Phone (608

organisa in the State of the St		Certification of Circulator	
Liz Dannenhaum	(certify): I reside at	4312 Major Avenue	

(Printed Name of Circulator)

(Circulator's Residence - Street Name and Number)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Circulators, Please include you

Phone

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by .] Committee

PO Box 256

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.				
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1.  Print: Michael Crawford  Sign: Machael Crawford	street: 716 Starlight CT  City: COTTAge Grove Zip: 53527	Town Willage City  COTTAGE GROVE (Municipality Name)	/ 5/20 <u>  </u> (Month) (Day) (Year)	Phone
2. Print: ALLAN KENT Sign: Colle Xcm.	Street: 301 W. LAKEVIEW AVE.	☐ Town ☐ Village ▼ City  MADISS  (Municipality Name)	///15/20// (Month) (Day) (Year)	Phone ( )
Sign: Jana Wayne	Street: 4207 SAVANNAHCT.  City: MIDDLETON Zip: 53562	□ Town □ Village ■ City    MIDDLETO N (Municipality Name)	// //5/20_11 (Month) (Day) (Year)	Phone
4. Robert Lapacek Sign: Povert Lapacek	street: W7828 Teeter Rd.  53955  City: Poynette zip: Wiss.	Town Willage City  City  (Municipality Name)	(Month) (Day) (Year)	Phone
sien: Jan dognar	street: W9570 Henry 57  city: Cambridge zip: 53523	Town  O Village  City  (Municipality Name)	1) /15/20	Phone
, ALLAN KENT	Certification of Circulator	1		
I HLLAN KENI	(certify): I reside at 30/ W. LAKEVIEW	AVE. MADISON	e Programma de la companya de la comp	Cinculatore

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Circulator's Residence - Street Name and Number)

(Printed Name of Circulator)

Circulators, Please include your con Phone

(Circulator Municipality)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	Co	
1.  Print Juna G. Krajewski  Signifuma D. Kaje Cai	Street: 4208 Jerome St.  City: Madison 21p: 537/6	Town Village City  Machison (Municipality Name)	// /5/20// (Month) (Day) (Year)	Phone (	
Shuley of Die Drich	Street 4210 Jerone 87	□ Town □ Village ▼ City  MADISON (Municipality Name)	// // // (Mouth) (Day) (Year)	Email Phone	
Print: Sonia M Klei'n	Street: 205 E. Oak St.  City: Lake Wills Who: 5355/	Town Village SCity  Lake WillS (Municipality Name)	//5/20 (Mouth)(Day) (Year)	Phone (	
Print: Aimee Hilsenhoff Sign: Obleco 4 WK	Street: SOF NORTHPORT DR #15  City: MADSON Wize: 63764	Town Village City (Municipality Name)	11/14/2011 (Mouth) (Day) (Year)	Email  WY  Phone  (WC)	
5. Print besire el pland Sign: Desire Milyrol	sires 515 Narthport ar 43	Town Village Octy  (Municipality Name)	(Month) (Day) (Year)	Phone (	
Thomas G. Kraigus K. (certify): I reside at 4208 Tename. St MADISON					

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(Circulator's Residence - Street Name and Number)

(Signature of Circulator)

(Printed Name of Circulator)

(Circulator Municipality)

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NAME & SIGNATURES OF ELECTORS	THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAY  STREET & NUMBER OR RURAL ROUTE  Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	
1. Michelle Keene sign: Michelle Keene	street: 5007 MARSH 12D  City: Me Farland zip: 53558	Town Village City  Mc Fac land (Municipality Name)	11/14/2011 (Mouth) (Day) (Year)	Phos (C
Sign: Lynch RW Leges Z.  3.	R HARA MISSOURI RD	Town Village City  (Municipality Name)	) / /6/201) (Month) (Day) (Year)	Ema  Of  Phon
Print: Lila walters  Sign: Sula waters	Street: 16TT Non Ra	Town Village City  Collage (Municipality Name)	(Mouth) (Day) (Year)	Email  Ki  Phone
Sign: CONCY COURT CWS	Sure: 326 Humining ind Lune City: NAWISH Zipi 53714	Town Village City (Municipality Name)	// //6/20_L (Mouth) (Day) (Year)	Phone (
Print: Tina Schlueter Sign: 21 na Schlueter	Street: 53955  City: Poynette WI 23955	Town  Noticipality Name)	(Mouth) (Day) (Year)	Phone
(Printed Name of Lirculator)	rtify): I reside at 4208 Jerom e St (Circulator's Residence - Street Name and Num		ouniv) .	Circulator:
personally circulated this recall petition and personally obtained in this petition. I know that each person signed the particular petition. I am aware that falsifying this certification is personally obtained by the personal petition. I am aware that falsifying this certification is personally obtained by the personal personal personally obtained by the personal person	ined each of the signatures on this paper. Know that the signers are electors per with full knowledge of its confent or the date indicated opposite his or hounishable under \$.12.13(3)(a), Wis. Mats.		officeholder . I support this	Phone ( Email

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. David Christenson	David Christenson	street: 4312 Major Ave City: Madison, Wi. zip. 53716	Town Village MADISON	11/16/20 <u>11</u> (Month) (Day) (Year)	Email Phone
2. Michelle Christenson	michelle Christenson	Street: 4312 MAJOR AUE  City: MADISON W. Zip: 53716	□ Town □ Village ☑ City □ VIDEN	// //6/20_// (Month) (Day) (Year)	Email Phone
THOMAS MOSS	Horace	Street: 4310 DAEXEL City: MADISON WI AZID: 537/6	Town Village City  MADISTN	// /K /20// (Month) (Day) (Year)	Phone
1. Janofasse	Jane Fasse	Street: 4310 DICXUI	Town Village City MAD SON	(Month) (Day) (Year)	Phone
5. Sully Bordea	Sally Borden	Street: 4304 Drevel Ave	Town Village Madison		Phone Email
6. Clifford Borden	Eliford Borden	Street: 4304 Drexel Aux City: Madison zip: 53716	Drown Wadisac	(Month) (Day) (Year)	Phone
VICKI L-ANDERSON	Vicke L. Conclosson	Street: 2149 HERITAGE CT City: COTTAGE GROVE LOTE 53527	Trown COTTAGE City GEOV 9	11 / 14/20 11 (Month) (Day) (Year)	Email Phone
SALLY R. YOUNG	Sylv R. V	Street: 4112 MAJOR AUE City: MADISON, WF Zip: 53716	Town Uvillage ACity MADISON	/////20 <u>/(</u> (Month) (Day) (Year)	Phone
Heidi J. Meier	Heidi Maren	Street: 2307 SUPERIOR ST. City: MADISON Zip 53704	Town Uyillage UCity  MAD ISON	// //6/20// (Month) (Day) (Year)	Email Phone
Patrick Kirsop	Patrillerite	Street: 1407 Lake Keginsa Rd City: Stoughton zip: 53589	City Rutland	// // 20 <u>  [</u> (Month) (Day) (Year)	Email
Donag 5	Certification	of Circulator  H3/3 MAJOR  ATOR	AVP MADISC	211	
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<b>V</b> · • · ·	VIEW DE CINCOLONIA	City: COLINGE GROVE	- War 33001	GEOVE	L L.
SAZLY R. VOUNG	Swar. V	Street: 4112 MAJOR City: MADISON, WI	## AUE	MADISON	///6/20/1
Heidi J. Meier	Heidi Mares	Street: 2307 SUPER.		MADISON	// // /20 // I
Patrick Kirsop	Datablish	Street: 1407 Lake Ke	egt visi Rd	Rutland	// // 20 11 1 (Month) (Day) (Year)
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(Month) / (Day) / 20 (Year)	- Alexa	(Signature of Circulator)		Page No. (0)	ficial Use Only)
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Susant Case	Street: Street	Town Village City  (Municipality Name)	11 /5/20 11 (Month) (Day) (Year)	Phone (
Print: STEVEN COOK Sign:	street: 161 Dunning St  City: Madison zip: 53704	Town Village City  (Municipality Name)		Phone (
3. VOTORIA MYINT Sign: VILLMA MAR	Street: 161 Dunning ST  City: Madison Zip: 53704	Town Village WCity  (Municipality Name)	11 /15/2011 (Month) (Day) (Year)	Phone
4. Print: John H Pope Jr Sign: John H Pope Jr	street: 165 Dunning St #2  city: Madison zip: 53704	☐ Town ☐ Village	11 /15/20 11 (Month) (Day) (Year)	Phone (60
5. Scott Jones  Sign: Jeans	165 DUNNISO 57 4/ Street:  MADISON 5:3704 City: Zip:	Town   Village   City   MADISON   (Municipality Name)	//15/20_11 (Month) (Day) (Year)	Phone (60
I, Michael Hay Chapyan, (Printed Name of Circulator)	Certification of Circulator  (certify): I reside at 126 Duning Street  (Circulator's Residence - Street Name and Nu	H Madison (Circulator Munic	Scipality)	Circulator Please include

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personally circulated this recall petition and personally named in this petition. I know that each person signed the recall petition. I am aware that falsifying this certification.	ne paper with full knowledge of its content on the date indicated op	ers are electors of the jurisdiction or district represented by the officeholder posite his or her name. I know their respective residences given. I support this
recall petition. I am aware that falsitying this certification.	White Here Charon	Page No. (Official Use Only)
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(Signature of Circulator)

(certify): I reside at

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(Circulator Municipality)

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(Printed Name of Cilculator) (Circulator's Residence - Streyt Na	ame and Number) (Circulator Municipality)
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1. Print: WAGNE LENIUS Sign: Wayne Levius	street: 173 Dunning St.  City: Madison zip: 53704	☐ Town ☐ Village  City  Mad-150  (Municipality Name)	1 / 15/20 11 (Month) (Day) (Year)	Phone (
2. Veronica Pickar Sign: Working Herbore	street: 137 Dunning Stapt   City: Madison zip: 53704	Town Village City (Municipality Name)	1 /15/20 1 (Month) (Day) (Year)	Phone (
3.  Print: Adam Wallenfang  Sign: Adam Wallfay	Street: 727 E. Johnson St. Apt 3  City: Madison Wl zip: 53703	□ Town □ Village	// /16/20 <u>//</u> (Month) (Day) (Year)	Phone
4. Print: Sherry Drewsen Sign: Sherry Drewsen	street: 1119 Woodbridge Trail city: Waunakee, Wlzip: 53597	□Town  Village □City   Waunakee   (Municipality Name)	// //6/201_/ (Month) (Day) (Year)	Email Phone
5. Print: Mary Goonan Sign: Mary Goonan	Street: 406 Belle Ave City: Belleville, WI zip: 53508	Town  Willage  City  Belleville  (Municipality Name)	// //6/20 <u>  </u> (Month) (Day) (Year)	Email Phone
I. Michael Hey-Chapman, (Printed Name of Circulator)	Certification of Circulator certify): I reside at (Circulator's Residence - Street)Name and Nuc.	Hadison (Circulator Munic	<u>J</u> :ipality)	Circulators,

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1. Kimberly A Moreland	Kimberley a Moreland	Street: 2692 Mica Rd	□ Town □ Village Fttchburg	11 /16/20 <u>11</u>	Email Phone
	1	City: Frehburg WI zip: 53/11	XCity FITCHSUNG	(Month) (Day) (Year)	(
2. Robert C Moreland	1 PXV.)	Street: 2692 Mica Rd	Town Utillage Fitchbug	11/14/20/11	Email Phone
2	100	City: Fitchburg Wl zip: 53711	Acres	(Month) (Day) (Year)	(
3. Natasha E <b>statua</b> na	1	Street: 4613 Maher Ave	□ Town □ Village	1 /16/20 <u>11   P</u>	Email Phone
		city: Madison, WI zip: 53746	XCity Madison	(Month) (Day) (Year)	(
* Astrox Bhargava	ASLANGOLI A	street: 5631 Longford Terr, 102	Town Pitchburg	11/16/2011	Email Phone
Java	- Value	city: Fitchbulg zip. 55711	Acity HTC/16479	(Month) (Day) (Year)	(
5. Grant W Petty	En wa	Street: Z911 Rubin F	Town Village Fitchsure	11/16/20 <u>//</u>	Email Phone
		city: Fitchburs WI zip: 5371	SCity / 15C53675	(Month) (Day) (Year)	(
6. Kyle Nabilcy	Va. In	Street: 6937 Mill Bloff Dr.	□ Town Village \	110/2011	Email
THE MASILY	qui	city: Madison, Wi zip: 53718		(Month) (Day) (Year)	Phone (
7.		Street: 6937 MILL BLUFF DEIVE	☐ Town ☐ Village	11/16/2011	Email
KRISTIME NABILLY	Krime X. Nabeley	City: Maoison, W1 Zip: 53718	String MADISON	(Month) (Day) (Year)	Phone (
8. Hilary	Helang Rahm	Street: 2227 WOOD RD	Town Widdleton	11 /16/2011	Email
Rohrer	Humy	city: Middleton zip: 53562	☐ City	(Month) (Day) (Year)	Phone (
9. Deana A.	Social Diamon	Street: 2648 Granite Road	□ Town	11 / 6/20 1	Email
Zorko	Deanart. of De	city: Fitchburg WI zip: 53711	Acity Fitchburg	(Month) (Day) (Year)	Phone (
10. Andrea H. La.A.	Andrea Kthebry	stree 2233 Wann in #4	Town Village 11 A A S	11/16/2011	Email
Andrea Huberty	I Share Kilma dall	city: Madler WI zip:53713	Livinge Madism	(Month) (Day) (Year)	Phone (
Certification of Circulator					
Stephen L Arnold		ify): I reside at 2530 Targhee St	Fitchburg	<del></del>	Circul
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9. Deand A. Zorko	Deanard. of De	Street: 2648 Granite City: Fitchburg WI	Road zip: 53711	Drown Scity Fitchburg	
Andrea Huberty	Andrea Kthebyg	stree 233 Wann W	1 #4 zip:53713	Prillage Madism	11 /16/20 <u>11</u> (Month) (Day) (Year)
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1 Stephen 1 Arnold	(cer	tify): I reside at 2530 Tam	whee St	Fitchbur	વ
(Name of Circus I personally circulated this recall petition and personally obt the paper with full knowledge of its content on the date indic	lator) ained each of the sign tures on this paper. [know that	(Circulator's Resider the signers are electors of the jurisdiction or dis	nce - Street name and strict represented by the	officeholder named in this petition. I know the	hat each person signed
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XIII, Section 12 of the Wisconsin Co	nstitution and S.9.10 of the Wisconsin Statu	ites.	· · · · · · · · · · · · · · · · · · ·	
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Suzanne J. Chapin	Auganne Je Chapien	City: Madian, WI zip: 53704	□ Town □ Village → City  Madisin	11/17/20/// (Month) (Day) (Year)
JASON CLAY	termeday	Street: 1351 3-45+ 16+24 City: Wadson zip: 53715	UTown UVillage City Wadran	// / 2011 (Month) (Day) (Year)
Tressa mohamed	Tressa Mohamed	Street: 140 MORRAINE VIEW DR. City: Malison zip: 53719	Town Village Deity Madison	(1 /11/2011 (Month) (Day) (Year)
Raymand Doyle	Raymil Durch	Street: 554 Hillerter OK City: Okason WE Zip: 57575	Town Stillage City  City  CK 250-7	///7/20_// (Month) (Day) (Year)
Afshin Xlassivi	A Nassiri	Street: 8212 N. North of City: Eventually Zip: 53536	Octive Evansville	/720
Steve WaldRM	It walder	Street: 435 WAINWT City: OREGON Zip:W1	Town Skillage Of Se GM	/   / 2011 (Month) (Day) (Year)
Walter Kaeser	walter Maleur	city: Mo Mong zip: 53716	Town O village City  Monony	/////20 <u>//</u> (Month) (Day) (Year)
Robert Monky	Do Ma	Street: 2321 Padge Sackuay  City: Muclisca Zip: 53713	Drown Village Madison	11/17/20 <u>11</u> (Month) (Day) (Year)
anessa Davis	Vanesse Fair	Street: 1414 LOVERN D City: Ma (NSC) Zip: 537//	Town Village Wadis.a	4/17/20/11 (Month) (Day) (Year)
Shannon Schrank	Million Salvac	Sirect: 5149 KVPEN CMUR Sirs: \$ MACUSY Zip: 53711	Town Village	(Month) (Day) (Year)
Avlene 5. Zuc	·	fy): I reside at 350 S. Hom 1 H	MST Maid (Circulator)	di sun

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(Signature of Circulator)

Phone

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	institution and S.9.10 of the Wisconsin Statu		ICIDAL ITY OF DESIDENCE MUST AL WAVE	DE LIETED
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
lisa Perni	Lin Pinn	City: MOCUSON Zip: 53711	Town Village West Mach SON	///7/20// (Month) (Day) (Year)
DAN HANSON	Dan Ham	Street: 4508 WINDIGO TRE	□ Town □ Village	11/11/2011 (Month) (Day) (Year)
JANICO 1. CRAY	1 Abres	Street: 9 LYONS CA  Street: MAN.SAN WI 5374	□ Town □ Village	11 /17/20_U (Month) (Day) (Year)
Donothy Goldsworth	Dunte greature	Street: 3206 Told Dr.	Town Village Village Village	////2011 (Month) (Day) (Year)
KENDDLL KEE	Verkallo Kily	Street: 1208 BLH ST 55115 City: MAD ISON 2105 3715	Town Village City Mad Saw	11/19/2021 (Month) (Day) (Year)
Angeline Kile.	Angeline Kelon	Street: 1208 Erin St Chy: Madison 21053715	Town Village Mad Sm	////20// (Month) (Day) (Year)
Andrew J. Benson	And Min	Street: 3590 Breckenridge Ct, #23	Ovillage Ritchburg	/ 17/20// (Month) (Day) (Year)
JACKGASNER	Jock Darry	Street: 5507 Taylor Rd #1 City: McFavland Zip: 53538	Town We Furland	M / 20 11 (Month) (Day) (Year)
PHYLLIS GASNER	Chulle Lapour	Street: 5507 Taylor Pd # 1 City: McFarland zip: 53538	Svillage McFar and 4	11/17/20
Tim SAVOLIW	li Sall	Street: 322 JEAPERSON 5T	Town Village OK CLON	11 /272011 (Month) (Day) (Year)
Arlene S. Zauc Name of Circu			St Mad  (Circulator N	For
ally circulated this recall petition and personally obt	ained each of the signatures on this paper. I know that	the signers are electors of the jurisdiction or district represented by the sidences given support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know the	hat each person signed

(Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

THE MUNICIPALITY USED FOR MAILING		TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MU!	NICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
ALLEN W. CLARK	Allew Cear	Street: 2525 GREGORY ST	Town Village City  MAD/SDN	11/15/2011 (Month) (Day) (Year)	Ema
2. LISA Goldman	Kin Ille	Street: 2121 COMMONWEALTH AUE	Town Madison	11/15/2011	Ema
3 BRUCE M. DAVEY	Brue M. Davey	Street: 83/ E. GORHAMS+	Town Village City  City  ADISM	(Month) (Day) (Year)	Em
4. MERI ANNIN	11PA	Street: 5005 Odana Rd	☐ Town	(Month) (Day) (Year)	Ema
5. Wendy A. Feamside	Wondy a Rearwide	city: Madison zip: 53711  street: 912 Van Buren St.  city: Madison zip: W 153711	Town Willage Walison	(Month) (Day) (Year)	Em
6. Katherine A. Bowie	Katheris A. Boure	Street: 4118 St. Clair St.  City: Madison WI Zip: 53711	□ Town □ Village Madison	// //5/20/// (Month) (Day) (Year)	Em
Judith Zukerman Kaufman	Judith Zukerman Kaufman	city: MADISON zip: 53705	Town Village MADISON	// /5/20_// (Month) (Day) (Year)	Em
8. Susan Schwaab	Swar School	street: 725 Seneca Place City: Madison zip: 53711	Town Village Madison		Em Pho
o. Chimera R. Peet	ChueaPPat	street: 3531 Gregory St City: madison zip: 53711	Town Village Stry Madison	11/15/2011 (Month) (Day) (Year)	Em
LONNY J. PEET		Street: 3531 GREGORY SX City: MADISON Zip: 53711	Town Village City  MADISON	(Month) (Day) (Year)	Em
A 4.	Certification of	of Circulator		1	-
	ator) ained each of the signatures on this paper. I know that the	fy): I reside at <u>1410 Seminole</u> Huy (Circulator's Residence – Street name an the signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsify	officeholder named in this petition. I know the	Municipality) nat each person signed	(

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Timothy m. Dondelly	That M. Dough	Street: 7224 SANKARIE DO City: MACISON Zip: 537/7	Town Utillage City  MAC' SOL	// // 20// (Month) (Day) (Year)	Email Phone
MILDRED SELL	Mildred & Sell	Street: 710 Saukdale Way City: Madeson Zip: 53717	□ Town □ Village □ City	(Month) (Day) (Year)	Email Phone
3. Denise Spangler	Denies Spangle	Street: 7/4 Saukdale Way City: Madison Wt Zip: 537/7	Town Village Madison	// // 5/20// (Month) (Day) (Year)	Email Phone
June Anderson	June anderson	Street: 730 Saukdale Way City: Madison zip: 537/7	Town Village City  City	// / / 20_11 (Mouth) (Day) (Year)	Phone
5. Geraldine Marten	5 Heraldine Martans	Street: 734 Saukdale Way City: Madison W/ Zip: 53717	Town Uillage Madison	// /5/20_// (Month) (Day) (Year)	Email Phone
6. Grave Fonsta	& Grace m Fonstad		Town Utillage City  Madisin	1//15/20// (Month) (Day) (Year)	Email Phone
DOROTHY KRUEGER	Glorathy Krueges	Street: 7210 SAUKDALE DR City: MADISON WI Zip:53717	Town Usillage WADISON City	///15/20/1 (Month) (Day) (Year)	Phone
8. SylviA L. Lynch	Eylvia Lynch	Street: # 13 Saukfale Dr. city: Madeison Zip: 53017	Town Dillage MAdison.	// /5/20_//_ (Month) (Day) (Year)	Email Phone
Marion Bridge		Street: 32 Saukdall In City: Madeson Vic Zip 57/7	Town Village	(Month) (Day) (Year)	Email Phone
BARBARA MELCHERT	A   //	Street: 7209 SAUKDALE DR.  City: MADISON W. Zip: 5.3717	□ Town □ Village  SCity  MADISON	// /5/20// (Month) (Day) (Year)	Email
	Certification (	of Circulator	_		-
MAYNARD A	XHNGUCA .(certi	ify): I reside at 20 SAUKDALE T	RMADL	スパン	

(Name of Circulator)	, , , , , , , , , , , , , , , , , , , ,	(Circulator's Residence - Street name and Number)	(Circulator Municipality)
I personally circulated this recall petition and personally obtained each of the si	gnatures on this paper. I know that the signers are	electors of the jurisdiction or district represented by the officeholder	named in this petition. I know that each person signed
the paper with full knowledge of its content on the date indicated opposite his o	r her name. I know their respective residences give	ven. It support this recall petition. I am aware that falsifying this certific	cation is punishable under-S.12.13(3)(a), Wis. Stats.
// /5 /20 //	Maynard A	Jehneider_	Page No. (Official Use Only)
(Month) (Day) (Year)	Signatur	e of Circulator)	#2392
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

	B PURPOSES, WHEN DIFFERENT THAN MUNICIPAL		ICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
HENRY LINDER	NAN Buy Ach	street: 1212 williamsen = 2 City: Made Son Zip: 53703	Town Willage City	// /5/2011 (Month) (Day) (Year)
* ANEL POSS		Street: 1/43 E. JOHUSON ST. #2  City: MARJON M Zip: 53793	□ Town □ Village  City  ANS	1 ( / 1 S / 20 / 1 (Month) (Day) (Year)
TROY PICKL	Tien / Peto	street: 212 S 15+ City: Madisaa WI zip: 53704	Town Village WASON	\\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Veronica State	John	Street: 3611 Portage Ld City: Madison zip: 53704	Town Village  D'City  MadleM	///5/20// (Month) (Day) (Year)
s. Heather Squall	Dule	street:   2   Ewashington St city: Day next exa zip: 53955	Town Village City  City	(Month) (Day) (Year)
6. JONATHON T. HAIN (	4776	Street: 1917 E Daylow II/ City: MADISON WI Zip: 53704	Town Village ACity  Mad 150	N / / S / 20 <sup>7</sup> /1 (Month) (Day) (Year)
T. Spertanië Reserve	- 829	Street: 1340 E. WILSON City: Mroison Zip: 53703	Town Village City  ADISON	(Month) (Day) (Year)
8. RACHEL POTCHONS	J. Paris	Street: 290 N MALAODO City: SSN PRAVZIE Zip: 53590	Town Village City A	(Month) (Day) (Year)
Eriva Ellessan	II	Street: 1341 Morrison St # 2 City: Madrson zip: 53703	Town Village City  City  City	(Month) (Day) (Year)
10. Kyle Feldmann	Kyl-	Street: 1401 Williams on City: Madison Zip: 53703	Town Village City Mad Son	\\ \/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
TIMO NOSON (Name of Circul		of Circulator  ify): I reside at (Circulator's Residence - Sheet name and	Ty Madison	Municipality)

	C 1100 - 1 - 1301		City: Madison	zip: \$3703 City	Man 20 1	(Month) (Day) (Year)
	10. Kyle Feldman	1 Kylin	Street: 1401 Willia	M4 0n Town Village	Madison	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
		Cer	rtification of Circulator		1	
I, _	TIMO NOSON		, (certify): I reside at	W. Ingersal Fy	Madisor	(
	(Name of Circ			Residence – Street name and Number)	(Circulator Mi	
			aper. I know that the signers are electors of the jurisdiction with the respective residences given. I support this recall p			
	//////20 /	1 JUNE	- Noloco I	<u> </u>	Page No. (Offi	cial Use Only)
	(Month) (Day) (Year)	<del>`</del>	(Signature of Circulator)		# 23	943
				800000000000000000000000000000000000000	i	<u></u> ; r

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

	PURPOSES, WHEN DIFFERENT THAN MUNICIPALI		NICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.
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Ralph Shively	Relph Strivel	Street: 134 Division St. City: Madison 5370411.	Town Village Madison	[1] /15/20/1/ (Month) (Day) (Year)
David M. Munda	Daid M. Made	street: 827 E Johnson #1  City: Madison zip: 53703	Town Village Madison	(Month) (Day) (Year)
3. Earl Meier	Earl Meren	street: 4905 Ruth St City: Madison Zip: #3716	Town Usillage Active Madison	
LINDA H.C. MEIER	Timaaddleiés	Street: 4905 RUTH ST  City: MADISON zip: 53716	Town Usillage MADISON	(Month) (Day) (Year)
5. Graham Cody	20 Coch	Street: 1252 Morrison Ct.	Town Village Mad 1500	
Richard (Nelle	In the the	Street: 5/10 Myn itowas City: Medison Zip: 13/15	Town Usillage QCity  Madisa	// / <del>/ 20</del> // P
1. Luke Skouron	hilly	Street: 4037 Monona 2  City: Monona zip: 53716	Town Village Monona	//////////////////////////////////////
8. Charlotte Dietzman	Charlotte Determen	MADISON, WI 263704	Town Village Party MACISON	(Month) (Day) (Year)
9. DAVID R. HARRISON	t MM Zz	Street 1833 WINCHESTER ST City: MADISON Zip: 53704	Town Village  CKCity  MAD   SOP	11/15/2011 (Month) (Day) (Year)
NOAH Holges	Jelle Salley		Town Village Madi Son	$\frac{1}{\text{(Month) (Day)}} / \frac{201}{\text{(Year)}}$
Tim Nekan	Certification	110/- 111 moral	1#1 Mack	71
(Name of Circul	ator)	ify): I reside at(Circulator's Residence — Street name and the signers are electors of the jurisdiction or district represented by the	d Number) (Circulator I	Municipality)

(Day)

(Year)

(Month)

the paper with full knowledge of its content on the date indicated opposite his or he name. I know their respective disidences given I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott

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warker from office pursuant to Article Atti, t	Section 12 of the Wisconsin Constitution and S.9.10 of the	wisconsin Statutes.		PO Bo
THE MUNICIPALITY U	JSED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAY			Madiso
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	
1. Print: Glenn R. Smeaton Sign: Slemn R. Smeaton	Street: 4467 L. bby RA  City: Madison W/ 21p: 537//	II Town	///5/20// (Month) (Day) (Year)	Email S * Phone
2. Print: Diane M. Smeaton significant		Orown    Village   City    B/00 ming 6 rove   (Municipality Name)	// / \$\frac{1}{20} // (Month) (Duy) (Year)	Sm Phone
Sign:	Street:  City: Zip:	☐ Town ☐ Village ☐ City  (Municipality Name)	/ /20(Month) (Day) (Year)	Phone (
4. Print:	Street:  City: Zip:	☐ Town ☐ Village ☐ City  (Municipality Name)	//20(Month) (Day) (Year)	Email Phone
5. Print:	Street:  City: Zip:	☐ Town ☐ Village ☐ City  (Municipality Name)	/ /20(Month) (Day) (Year)	Email Phone
I, GLENN Smeaton, ( (Printed Name of Circulator)	(certify): I reside at   Certification of Circulator  (Circulator's Residence - Street Name and No	Junber) Girculator Municip		Circulators

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its coment on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under \$.12.13(3)(a), Wis. Stats.

(Month)

Phone

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PO Box Madison THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING NAME & SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING (Also Indicate Town, City, or Village) Rural address must also include box or fire no. Email □ Town □ Village TCity

J. J.	City Mad, 500, W/ Zip: 53711	(Municipality Name)		(60)
2. Print Tephonie Scende	Street: 521 EUGENIA AUE  City: Marison Zip: 53705	Town Village Village  (Municipality Name)	// /S/20_11 (Month) (Day) (Year)	Email Shop Phone
3.  Amanda Bass  Sign: Camanda Bass	street: 112 Dale Dr.  City: Lodi zip: 53555	Town U Village City (Municipality Name)		Email  Man Phone
4. Michael Bass Sign: Michael Bass	Street: 112 Pale W  City: Lod 1 24p: \$3585	▼Town □ Village □ City  Lod (Municipality Name)	// // 5/20 <u>1</u> L (Month) (Day) (Year)	Phone (
5. GERRY BORES Print: Jerry Biris	Street: 964 WABAN Hell  City: Madisan Zip: 53711	Town Utillage City  Made Ser (Municipality Name)	U / 15/20_11 (Month) (Day) (Year)	Email Phone
(Printed Name of Circufator)  [ personally circulated this recall petition and personally of	Certification of Circulator (certify): I reside at 222264 H, // (Circulator's Residence – Street Name and Numbrained each of the signatures on this paper. I know that the signers are elector paper with full knowledge of its content on the date indicated opposite his or header.	rs of the jurisdiction or district represented by th	cipality) ne officeholder	Circulators, Please include ya Phone ( G O S

(Day) (Month)

Return

Commit

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JEFF BAILEY	A Bin	Street: 2012 MERRILL AVE	Town Village BELOIT	////5/20/// (Month) (Day) (Year)
		Street: 2630 COMM CACALAN	☐ Town ☐ Village  ☐ City	// //5/20// (Month) (Day) (Year)
MICHOLAS P. POLYS	Mars Don	City: MDD 15 3 N Zip: 53704  Street: 123 WEST WASH	□ Town	(1 /15/20 <u>((</u>
	Meldas-Volle	Street: 5924 Oak Hollow Dr.	Day MADISON	(Month) (Day) (Year)
Linda Hanson	Tinda Hanson	City: McFarland WI zip: 53558	DCity McFarland	(Month) (Day) (Year)
Tristan Hancy	Totan Hanes	Street: 704 Cherry wood Ct #Z  City: Madison zip: 53714	Town Village Got Sin	(Month) (Day) (Year)
Jenna Vandevoort	ginna dunu	street: 205 Langdon St #113  - City: Madisch Wl zip: 55703	Town Village Madisun	(Month) (Day) (Year)
Grace Riedle	Grace Riedle	Street: 1923 Sherman Ave. City: Madison, WI zip: 553704	Town Utillage Madison	11/15/2011 (Month) (Day) (Year)
Toya ledracine	Tracken led	Street: 1030 Seguoia Trail City: Madison WI Zip: 53713	□ Town □ Village □ City  Madi Son	11 /15/2011 (Month) (Day) (Year)
JAMES IN PLIGHT	games Word RD	Street: 301 Clyde ballachenel City: MACISTON Zip: 53194	Town Village Deny Mach SO N	(Month) (Day) (Year)
O. Steven P. Van Lankvek	Ita Pillet	Street: W11902 Hwy V  City: Lodi zip: 53553	SxTown City West Point	// /5/20 <u>//</u> (Month) (Day) (Year)
	Certification			
Joanne Kanter (Name of Circul		ify): I reside at 2136 E Main 5- (Circulator's Residence – Street name and	Cify of (Pirculator)	Madison Municipality)
ally circulated this recall petition and personally obta	ained each of the signatures on this paper. I know that t	the signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know t	hat each person signed
11 / 120 //	(\ 1 9/	- F		

(Signature of Circulator)

(Day)

(Year)

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Joanne & Kanto	Joanne F. Kanter	Street: 2136 E Main St City: Madison Zip: 53704	Town Willage Madison	// //5/20// (Month) (Day) (Year)
Taylor BOCK	Tayla Book	street 6913 Littlemore Dr.	Town Village Mad Son	///5/20/( (Month) (Day) (Year)
Jo Ellen Crinion	porllenceine	street: WZ805 P'ine Ridge Ct, City: Belleville, WI zip: 53508	&Town □ Village □ City Exeter	11 /15/20 <u>11</u> (Month) (Day) (Year)
DONALD WAS JOHNSON	Donaldium John	Street: 3002 NESSUNG ST City: MADKON, W/ Zip: 53719	Town Village MADISON	(Month) (Day) (Year)
Carlos Gonzales	Carlos Gangalis	street: 2406 Independence LN204 City: Merdison Wi zip: 53704	Town Village ACity Madison	11/15/2011 (Month) (Day) (Year)
ath. Birt	Halabir	Street: 2609 Dunwoody Dr. City: Mady Son W1 zip: 53713	Town Utillage World Sov	// /5/20 1/ (Month) (Day) (Year)
Tami Trevino	The Junior	Street: 2359 ESSEX Drive	Town Village Sun Plairie	////5/201/ (Month) (Day) (Year)
Carl Mumm	Cartlynn	Street: 2021 Sherman Ave #/ City: Madison zip: 53704	Town Village Madison	// // 5/20 [[ (Month) (Day) (Year)
JOHN BANGECOS	JUMB=	Street: 4624 OAK 5'T.  City: VhORRISON UICLE Zip: 55571	Town Savillage City DEFOREST	///5/20// (Month) (Day) (Year)
UNISTONDIA JONES	DVS	Street: 4711 JENENEINEDE City: MADISON ZID: 53711	Town Uvillage  City MAdisory	//////////////////////////////////////
A - 1/1	Certification of		,	- 11 A
Name of Circular Vicirculated this recall petition and personally obtain	ator) ined each of the signatures on this paper. I know that t	ify): I reside at 2136 E Maih St (Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the	e officeholder named in this petition. I know t	Municipality) that each person signed
with full knowledge of its content on the date indicated by the da	ated opposite his other name. I know their respective	residences given. I support this recall petition. I am aware that falsifyi  ManU  (Signature of Circulator)	ing this certification is punishable under S.12.	.13(3)(a), Wis. Stats.  Official Use Only)

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Linda Mundt	Munds	street: 1201 Evings.  City: Madisin zip. 53715	Town Village Wadison	// /5 / 20 <u>/</u> (Month) (Day) (Year)
Kimberly Strother Elizabeth Ryan	Kimberly Shother	street: 834 Terry P1 city: Madison W/ zip: 53711	Town Village Madyson	/// \$5/20// (Month) (Day) (Year)
Elizabeth Ryan	Elizalseth A Ryan	street: 505 Charles Lane City: Madison, WI 53711-1311	Town Village Madison	// /15/20// (Month) (Day) (Year)
Martha Doelp	Marka Doelp	Street: 619 Gilmore Street  City: Madison WI zip: 537//	Town Village Madison	// /5/20_// (Month) (Day) (Year)
Martha Doelp Kathy Cantuell Suith	Haray Smixl	Street: 4326 Critchell TR City: Madison, W/ zip:53711	Town Wadison	)[ /(5/20 <u>11</u> (Month) (Day) (Year)
j.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) / (Year)
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•		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) / (Year)
0.		Street: City: Zip:	□ Town □ Village □ City	/ /20(Month) (Day) (Year)
D d. 1 / 1/ 11	Certification	of Circulator ify): I reside at 1639 Monroe Street	11 1	

I, \_ I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. Know their respective peridences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator) (Month) (Day) (Year)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

	onstitution and S.9.10 of the Wisconsin Sta ig purposes, when different than municipal	,	NCIPALITY OF RESIDENCE MUST ALWAY	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1 Jarcol Perez	4mh	Street: 6004 Schroeder Rd.  City: Madison Wi zip: 53711	Town Willage Middleton	/15/2011 (Month) (Day) (Year)
2. Mark D. Runkel	Mark D. Runbal	Street: 900 Stoney Hill Lane City: CoHage Grove Zip: WI 53	Town  Willage Cottage Grove  City  527	11 / 15 20 11 (Month) (Day) (Year)
3. Michael L-Sture	Michael LSture	Street: 115 Dahlen Cirche City: Cambridge zip: 53523	Town Cambon Age	(Month) (Day) (Year)
Barb Minor	Bartona Q. Mi	Street: 811 Dellwood Circle City: Monona zip: 53716	Town Village Monon q	
5. GWEN AVANT	gh.	Street: 3641 PAUS ST.  City: MAP180N zip: 53714	□ Town □ Village ☑ City MADISON	// / 5/20 <u>4</u> (Month) (Day) (Year)
6. Margaret Henderson	Attonnaryn	street: 110 W. GILMAN Apt 3  City: Madison zip: 53703	Town Village City Madison	11 /15/20 <u>/1</u> (Month) (Day) (Year)
JULIE PITSCH	Julie Potech	Street: 4085 Terrace DR. City: ha Crosse Wizip: 54601	□ Town □ Village SHELB \	11 / 15/20 11 (Month) (Day) (Year)
8. Alex Kalfayan	alex	Street: 169 ROLARY CT. APT. #Z  City: Mazison, WI zip: WIJ53715	Town Village Mad'307	11 /15/2011 (Month) (Day) (Year)
" Mapina Drake	Marin Drule	Street: 46 Dixon St. City: Madison WI zip: 53704	Town Village Madison	
FAYE ANALLA	Faye & analla	Street: 5110 S. Hidden Dr. 53221 City: Greenfield WI zip: 53221	Town Village Scity Moerfuld	(Month) (Day) (Year)
Gan L Johnson	<i>O</i> Certification	of Circulator  tify): I reside at 3610 Horney Dr. (Circulator's Pasidanae Street name on	Padison Villago of	Shurewood Hill